| PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004   |  |   |                       |                               |              |                 |            |   | Application or Docket Number |                        |            |                  |                        |  |
|--|--|---|-----------------------|-------------------------------|--------------|-----------------|------------|---|------------------------------|------------------------|------------|------------------|------------------------|--|
|  |  |   |                       |                               |              |                 |            |   | 10/552982                    |                        |            |                  |                        |  |
| :  |  | CLAIMS A                                  | (Column 1) (Column 2) |                               |              |                 |            | SMALL ENT                               |                              | TITY                   | OR         | OTHER<br>SMALL E |                        |  |
| U.S. NATIONAL STAGE FEES   |  |   |                       |                               |              |                 |            | R                                       | FEE                          | 1                      | RATE       | FEE              |                        |  |
| BASIC FEE  |  |   |                       |                               |              | ····            | $\exists$  | BASIC FEE                               |                              |                        | OR         | BASIC FEE        | 300                    |  |
| EXAMINATION FEE  |  |   | i                     |                               |              | _               | 1          | EXAM. FEE                               |                              |                        | 1          | EXAM. FEE        | 200                    |  |
| SEARCH FEE   |  |   |                       |                               |              |                 |            | SEARCH FEE                              |                              |                        | 1          | SEARCH FEE       | 400                    |  |
| FEE FOR EXTRA SPEC. PGS.   |  |   | minu                  | / 50 =                        |              |                 | X \$ 125 = |   | 1.                           | 1                      | X \$ 250 = | /                |                        |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 14 min                | •                             |              |                 |            | X \$ 25 =                               |                              | OR                     | X \$ 50 =  | 1                |                        |  |
| INDEPENDENT CLAIMS   |  |   | 2 minus 3 = .         |                               |              |                 |            |   | 100 =                        |                        | OR         | X \$ 200 =       | 7                      |  |
| MULTIPLE DEPENDENT CLAIM PRE   |  |   | SENT                  |                               |              |                 |            | 180 =                                   |                              | OR                     | + \$ 360 = | /、               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                       |                               |              |                 |            | TO                                      | TAL                          |                        | OR         | TOTAL            | 400                    |  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |  |   |                       |                               |              |                 | 3)         | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                              |                        |            |                  |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESEN<br>EXTRA | T          | R/                                      | ATE                          | ADDI-<br>TIONAL<br>FEE |            | RATE             | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | 14  | Minus                 | - 2                           | υ            | =               |            | X \$                                    | 25 =                         |                        | OR         | X \$ 50 =        |                        |  |
|  | independent  | • 2_                                      | Minus                 | ر                             | <u> </u>     | = /             |            | X \$                                    | 100 =                        |                        | OR         | X \$ 200 =       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                       |                               |              |                 |            |   | 180 =                        |                        | OR         | + \$ 360 =       | /.                     |  |
|  |  |   |                       |                               |              | ι               |            |   | ADDIT.<br>FF                 |                        | OR         | FFF              | Z                      |  |
|  |  | (Column 1)                                |                       | (Colur                        | nn 2)        | (Column         | 3)         |   |                              |                        |            |                  |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY | PRESEN<br>EXTRA | r          | R/                                      | ATE                          | ADDI-<br>TIONAL<br>FEE |            | RATE             | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus                 | **                            |              | =               |            | X \$                                    | 25 =                         |                        | OR         | X \$ 50 =        |                        |  |
|  | Independent  | *   | Minus                 | ***                           |              | =               |            | X \$                                    | 100 =                        |                        | OR         | X \$ 200 =       |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                       |                               |              |                 |            |   | 180 =                        |                        | OR         | + \$ 360 =       |                        |  |
|  |  |   |                       |                               |              |                 |            |   | ADDIT.<br>FF                 |                        | OR         | TOTAL ADDIT.     |                        |  |
| +++  | <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".</li> <li>The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</li> </ul> |   |                       |                               |              |                 |            |   |                              |                        |            |                  |                        |  |